Division 293 tax Due and payable Election form

Complete this form if you wish to release an amount from your superannuation fund(s) to pay your Additional tax due and payable amount. It can also be used where an unsuccessful release has previously occurred and you want to choose a different fund/account. Please note:
- when completing the form, all fields are mandatory
- you are able to choose more than one superannuation fund
- the amount released may be used to pay any income tax liability you have and offset any outstanding liabilities or other Australian Government agency debts. The remaining amounts will be credited to you
- this election is irrevocable.

To make an election you must return this form to us within 60 days of your Division 293 tax Notice of assessment issue date.
Refer to your Division 293 Notice of assessment or visit our website ato.gov.au/division293 to find out more.

Completing this form
- Print clearly, using a BLACK pen only.
- Use BLOCK LETTERS and print one character per box.
- Place X in ALL applicable boxes.

Section A: Personal details

1 Tax file number (TFN) □□□□ □□□□ □□□□
   You don’t have to provide the TFN to us. However, if you do, it will help us identify the member correctly and process your report quickly. For more information on privacy, refer to ato.gov.au/privacy

2 Name
   Title: Mr □ Mrs □ Miss □ Ms □ Other □
   Family name: □□□□□□□□□□□□□□□□□□□□□
   First given name: □□□□□□□□□□□□□□□□□□□□□
   Other given names: □□□□□□□□□□□□□□□□□□□□□

Section B: Division 293 tax assessment details

3 Date of your Division 293 tax Notice of assessment □□ / □□ / □□□□
4 Year of your Division 293 tax Notice of assessment
   (eg. use 2019 for the 2018–19 financial year) □□□□
## Section C: Due and payable amount

5 Your Additional tax due and payable amount $\ldots$

6 Superannuation fund details – provide election amounts

<table>
<thead>
<tr>
<th>Superannuation fund name</th>
<th>Superannuation fund ABN</th>
<th>Unique superannuation identifier (if applicable)</th>
<th>Member account identifier</th>
<th>Election amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$\ldots$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$\ldots$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$\ldots$</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Superannuation fund name</th>
<th>Superannuation fund ABN</th>
<th>Unique superannuation identifier (if applicable)</th>
<th>Member account identifier</th>
<th>Election amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$\ldots$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$\ldots$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$\ldots$</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Superannuation fund name</th>
<th>Superannuation fund ABN</th>
<th>Unique superannuation identifier (if applicable)</th>
<th>Member account identifier</th>
<th>Election amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$\ldots$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$\ldots$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$\ldots$</td>
</tr>
</tbody>
</table>

TOTAL ELECTION AMOUNT $\ldots$

- The total election amount cannot exceed the Additional tax due and payable amount on your Notice of assessment, or the amount we advised you in a more recent letter was not successfully released from your super fund(s) and you could elect to release from another fund(s).  

Section D: Declaration

Privacy
We are authorised by taxation law to collect information and to disclose it to other government agencies. You can find out more information about your privacy on our website ato.gov.au/privacy

Complete the declaration that applies to you

ACCOUNT HOLDER DECLARATION

I declare that the information contained in this election form is true and correct.
I acknowledge that this request is irrevocable.

Name (Print in BLOCK LETTERS)

Signature

Date
Day / Month / Year

Contact number

OR

LEGAL REPRESENTATIVE DECLARATION

I, the legal representative, declare that:

I have prepared this document in accordance with the information supplied by the client
I have received a declaration from the client stating that the information provided to me is true and correct
I am authorised by the client to give this election form to the Commissioner
The client who has supplied the information acknowledges this request is irrevocable.

Name (Print in BLOCK LETTERS)

Signature

Date
Day / Month / Year

Contact number

Tax agent number (if applicable)